

Assistant Commissioner for Patents
Washington, D.C. 20231
Sir:

1-28-00
ATTORNEY DOCKET: YO999-357 (8728-320)
Date: January 27, 2000
Express Mail Label: 33927938US
Date of Deposit: January 27, 2000

Transmitted herewith for filing is the Patent Application of:

Inventors: Michael K. Gschwind

For: METHODS FOR RENAMING STACK REFERENCES IN A COMPUTER PROCESSING SYSTEM

Enclosed are: [X] 40 sheets of specification; [X] 1 sheet(s) of Abstract; [X] 12 sheet(s) of claims; [X] 6 sheet(s) of drawing(s);

[X] An assignment of the invention to International Business Machines Corporation with Recordation Form.

[X] Declaration and Power of Attorney.

[] A certified copy of a _____ application, from which priority under Title 35 USC §119 is claimed.

[X] Associate Power of Attorney.

The filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)
FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	39 - 20 =	19
INDEP CLAIMS	4 - 3 =	1
MULTIPLE DEPENDENT CLAIMS PRESENTED		

OTHER THAN A
SMALL ENTITY

RATE	FEE
	\$690.00
X \$18 =	342.00
X \$78 =	78.00
+ 260 =	
TOTAL	\$1,110.00

If the difference in Col. 1 is less than zero, enter "0" in Col. 2.

[] A check in the amount of \$_____ to cover the [] filing fee(s), [] recording fee is enclosed.

[X] Please charge my Deposit Account No. 50-0510/IBM (Yorktown Heights) in the amount of \$1,110.00.

[X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510/IBM (Yorktown Heights). A duplicate copy of this sheet is enclosed.

[X] Any additional filing fees required under 37 CFR 1.16.

[X] Any patent application processing fees under 35 CFR 1.17.

Respectfully submitted,

By:

Gaspere J. Randazzo
Gaspere J. Randazzo
Registration No. 41,528

Please address all
correspondence to:

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Attorney for:

IBM Corporation
Intellectual Property Law Dept.
P.O. Box 218
Yorktown Heights, NY 10598

CERTIFICATION UNDER 37 C.F.R. §1.10

I hereby certify that this Application transmittal and documents referred to as enclosed are being deposited with the United States Postal Service on this date January 27, 2000 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EL433927938US addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Gaspere J. Randazzo
Gaspere J. Randazzo

JC584 U.S. PTO
09/492544
01/27/00

JC585 U.S. PTO
01/27/00

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PTO/SB/05 (4/98)

Please type a plus sign (+) inside this box → +

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	Y0999-357 (8728-320)
First Inventor or Application Identifier	GSCHWIND
Title	METHODS FOR RENAMING STACK REFERENCES IN..
Express Mail Label No.	EL433927938US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages 53]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the invention
 - Brief Summary of the invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 6]
4. Oath or Declaration [Total Pages 2]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Copy
 - b. ☐ Paper Copy (identical to computer copy)
 - c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☒ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. § 3.73(b) Statement ☒ Power of Attorney
(when there is an assignee)
9. ☐ English Translation Document (if applicable)
10. ☒ Information Disclosure ☒ Copies of IDS
Statement (IDS/PTO-1449) Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. ☐ Small Entity ☐ Statement filed in prior application.
Statement(s) Status still proper and desired
(PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. ☒ Other: ASSOCIATE POWER OF ATTORNEY

*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____
 Prior application information: Examiner _____ Group / Art Unit: _____
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label				<input type="checkbox"/> Correspondence address below	
<small>(Insert Customer No. or Attach bar code label here)</small>					
Name	Gaspare J. Randazzo				
Address	F. Chau & Associates, LLP 1900 Hempstead Turnpike, Suite 501				
City	East Meadow	State	New York	Zip Code	11554
Country	USA	Telephone	516-357-0091	Fax	516-357-0092

Name (Print/Type)	Gaspare J. Randazzo	Registration No. (Attorney/Agent)	41,528
Signature	<i>Gaspare J. Randazzo</i>	Date	1/27/2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, PTO Patent Application, Washington, DC 20231.

FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$) **1,150.00**

Complete if Known

Application Number	
Filing Date	January 27, 2000
First Named Inventor	Michael K. Gschwind
Examiner Name	
Group / Art Unit	
Attorney Docket No.	Y0999-357 (8728-320)

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **50-0510/IBM**

Deposit Account Name **IBM/Yorktown Heights**

☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:
☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	690	201	345	Utility filing fee	690
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	690	208	345	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$) **690.00**

2. EXTRA CLAIM FEES

Total Claims		Extra Claims		Fee from below		Fee Paid	
39	-20**	19	X	18	=	342	
4	-3**	1	X	78	=	78	
Multiple Dependent				260	=		

**or number previously paid, if greater; For Reissues, see below

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid
109	78	209	39	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) **420.00**

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	380	216	190	Extension for reply within second month	
117	870	217	435	Extension for reply within third month	
118	1,360	218	680	Extension for reply within fourth month	
128	1,850	228	925	Extension for reply within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,210	241	605	Petition to revive - unintentional	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
146	690	246	345	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	690	249	345	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) **40.00**

SUBMITTED BY

Name (Print/Type) **Gaspare J. Randazzo**

Signature 

Registration No. (Attorney/Agent) **41,528**

Complete (if applicable)

Telephone **(516) 357-0091**

Date **1/27/2000**

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.